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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f .	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name  Write the name that is on	Crystal First name	First name
your government-issued picture identification (for example, your driver's	Middle name Williams-Mickle	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4	XXX - XX- 5158	xxx - xx-
digits of your Social Security	OR	OR
number or federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Crystal First Name	Middle Name	Williams-Mickle Last Name	Case number (if known)	
FIISLINAITIE	iviique Name	Last Ivallie		
	About Debtor 1:		About Debtor 2 (Spouse	e Only in a Joint Case):
4. Any business names and Employer	I have not used any busine	ess names or EINs.	I have not used any busine	ess names or EINs.
Identification Numbers (EIN) you have used in the	Business name		Business name	
last 8 years	Business name		Business name	
Include trade names and doing business as names	EIN		EIN	
	EIN		EIN	•
5. Where you live	4200 M CON- C+		If Debtor 2 lives at a differer	nt address:
	Number Street		Number Street	
	Chicago Illinois	60636		
	City State	Zip Code	City State	Zip Code
	Cook			
	County		County	
	If your mailing address is dif		If Debtor 2's mailing address	
	<b>fill it in here.</b> Note that the courthis mailing address.	t will send any notices to you at	in here. Note that the court will	send any notices to this mailing
	tillo mailing address.		address.	
	Number Street		Number Office	_
	- Street		Number Street	
	City State	Zip Code	- City State	Zip Code
	Oity Glate	Zip Gode	City State	Zip Code
<ol> <li>Why you are choosing this</li> </ol>	Check one:		Check one:	
district to file for bankruptcy	Over the last 180 days be lived in this district longer	fore filing this petition, I have than in any other district.	Over the last 180 days bef lived in this district longer	ore filing this petition, I have than in any other district.
	I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)	I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)
		,		,
			-	

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Debto		Williams-Mickle Case number (if known)					
Part 2	First Name  Tell the Court Abo	Middle Name Last Name  ut Your Bankruptcy Case					
B ye	he chapter of the ankruptcy Code ou are choosing to le under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 32010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13					
	ow you will pay ne fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>					
ba	ave you filed for ankruptcy within ne last 8 years?	✓ No.         Yes. District         When					
ca be s <sub>l</sub> fil ye be	re any bankruptcy ases pending or eing filed by a pouse who is not ling this case with ou, or by a usiness partner, or y an affiliate?	✓ No.     Yes. Debtor Relationship to you   District When Case number, if known   Debtor Relationship to you   District When Case number, if known   MM / DD / YYYY    Case number, if known  MM / DD / YYYYY					
	o you rent your esidence?	<ul> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?</li> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>					

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Debtor 1 Crystal		N diala		Williams-Mickle	Case number (if known)	)	
Part 3: Report About An	v Bus			Last Name			
12. Are you a sole proprietor of any full- or part-time business?	y Bus	No.	Go to Part 4.  Name and location of b				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	Street  Street  Solution Street  Solutio	11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51B)) § 101(53A))	Zip Code	
13. Are you filing under  Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must kne deadlines. If you indicate that you are a small busines. If you indicate that you are a small deadlines. If you indicate that you are a small busines. If you are filing under Chapter 11, the court must kne deadlines. If you are filing under Chapter 11, the court must kne deadlines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are a small busines. If you indicate that you are filing under Chapter 11, the court must kne deadlines. If you indicate that you are a small busines.				a small business debt	or, you must attach your mos	t recent balance sheet, stateme	ent of
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	er 11, but I am NOT a	a small business debtor acco	ording to the definition in the to the definition in the Bankrup	otcy Code.
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs In	nmediate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and	<b>∀</b>		What is the hazard?  If immediate attention is i	needed, why is it need	ded?		
identifiable hazard to public health or safety? Or do you own any property that needs		,	Where is the property?	Number	Street		
immediate attention?							
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

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Debtor 1 Crystal Williams-Mickle Case number (if known)

#### Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 Crystal First Name		Villiams-Mickle Case number (if ki ast Name	nown)				
	uestions for Reporting Purpos						
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa ☐ No. ☑ Yes.		ty is excluded and administrative expenses are				
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below  For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/ Crystal Williams-Mickle Signature of Debtor 1  Executed on						

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Debtor 1 Crys	stal		Williams-Mickle	Case number (if known)			
First	Name	Middle Name	Last Name				
For your a you are re by one If you are represente	presented not ed by an	eligibility to proceed un the relief available und to the debtor(s) the not	der Chapter 7, 11, 12, or er each chapter for whicl ice required by 11 U.S.C.	13 of title 11, U h the person is . § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the		
	ou do not e this page.	/s/ Jason Diaz Signature of Attorney for	or Debtor	Date	10/28/2016 MM / DD / YYYY		
		Jason Diaz Printed name					
		Semrad Law Firm Firm name					
		11101 S. Western Aver Street	ue				
		Chicago		nois	60643		
		City  Contact phone	Sta	Email address	Zip Code jdiaz@semradlaw.com		
		Bar number		Illino			

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Fill in this information to identify your case:							
Debtor 1	Crystal		Williams-Mickle				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	First Name	Middle Name	Last Name				
United States B	Bankruptcy Court for the:	Northern	District of Illinois				
(State)							
Case number (If known)							

Check if this is ar
amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,766.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,766.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$13,419.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$30,892.00
Your total liabilities	\$44,311.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$2,761.98
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,770.00

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De	btor 1 Crystal		Williams-Mickle	Case number (if known)	
	First Name	Middle Name	Last Name		
Par	t4: Answer	These Questions for Adminis	trative and Statistical Reco	ords	
6. <b>/</b>	Are you filing fo	or bankruptcy under Chapters 7, 11, o	or 13?		
	_	ve nothing to report on this part of the for	m. Check this box and submit this for	m to the court with your other schedule	S.
	✓ Yes.				
7. <b>\</b>	What kind of de	ebt do you have?			
		are primarily consumer debts. Consusehold purpose. 11 U.S.C. § 101(8). F			
		are not primarily consumer debts. Yethe court with your other schedules.	ou have nothing to report on this par	t of the form. Check this box and submit	t
8.		ement of Your Current Monthly Inco ne 11; OR, Form 122B Line 11; OR, For		income from Official	\$3,323.33
9.	Copy the foll	owing special categories of claims fr	om Part 4, line 6 of Schedule E/F:		
	From Part 4	on Schedule E/F, copy the following:		Total claim	
	9a. Domestic	support obligations (Copy line 6a.)		\$0.00	
	9b. Taxes and	certain other debts you owe the government	nent. (Copy line 6b.)	\$0.00	
	9c. Claims for	death or personal injury while you were	intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loa	ans. (Copy line 6f.)		\$0.00	
	•	s arising out of a separation agreement	\$0.00		
	priority claims	. (Copy line 6g.)			
	9f. Debts to pe	ension or profit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	
	9a. <b>Total.</b> Add	d lines 9a through 9f.		\$0.00	

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Fill in this	information to identify your cas	e:					
Debtor 1	Crystal			Williams-Mickle			
	First Name	Middle N	lame	Last Name			
Debtor 2	if filing) First Name	Middle N	lomo	Last Name			
(Ородоо,	" ""'9) FIISt Name	Wilddle N	ame	Lastiname			
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois (State)			
Case num	nber			(State)			
Ott: -; -	- L Farmer 400 A /D					1	Check if this is an
Officia	al Form 106A/B						amended filing
Sche	dule A/B: Prope	erty					12/1
category v responsib write your Part 1:	where you think it fits best. B le for supplying correct info name and case number (if k Describe Each Resider	e as complete and rmation. If more s nown). Answer eve nce, Building, I	d accurat pace is r ery quest Land, o	r Other Real Estate You Ow	e are filing his form. n or Hav	together, both are e On the top of any ac	equally
1. Do you	u own or have any legal or ed No. Go to Part 2	quitable interest in	any resi	dence, building, land, or similar pro	perty?		
	Yes. Where is the property?						
1.1	Street address, if available, or	other description	Sing	the property? Check all that apply. le-family home	the	amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ims <i>Secured by Property.</i>
				lex or multi-unit building dominium or cooperative		rrent value of the	Current value of the
				ufactured or mobile home	en	tire property?	portion you own?
	Number Street		Land		De	contine the meture of	va aarabin
	Number Street			stment property eshare	int	scribe the nature of erest (such as fee si	nple, tenancy by
	City State	Zip Code	Othe		the	e entireties, or a life of	estate), if known.
			one.  Deb  Deb  Deb	as an interest in the property? Chec tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and another	k 🗀	Check if this is cor (see instructions)	nmunity property
			Other in	formation you wish to add about t	nis item,	such as local	
If you	own or have more than one, list	here:	bi obei t	y identification number.			
1.2	Street address, if available, or	other description	Sing	the property? Check all that apply. le-family home	the	amount of any secure	aims or exemptions. Put d claims on Schedule D: ims Secured by Property.
			Con	lex or multi-unit building dominium or cooperative ufactured or mobile home		rrent value of the tire property?	Current value of the portion you own?
	Number Street		Time	stment property eshare	int	escribe the nature of erest (such as fee single e entireties, or a life of	nple, tenancy by
	City State	Zip Code	one.	as an interest in the property? Chector 1 only tor 2 only		Check if this is cor (see instructions)	

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Crystal First Name	Middle Name	Williams-Mickle Cas	se number (	if known)	
1.3	et address, if available, or oth		What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home		Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property?	
Num		Zip Code	Land Investment property Timeshare Other  Other		Describe the nature of interest (such as fee sinthe entireties, or a life of the check if this is cor	nple, tenancy by estate), if known.
			Who has an interest in the property? Checon Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another other information you wish to add about the second of the debtors.		(see instructions)	
		pı ion you own for al:	roperty identification number:  Il of your entries from Part 1, including ar	ny entries	for pages	
<b>Do you ov</b> you own th	at someone else drives. If you ins, trucks, tractors, sport utili	equitable interest in I lease a vehicle, also	n any vehicles, whether they are registere o report it on Schedule G: Executory Contract cles			
3.1		Chevrolet IMPALA 2009 134000	Who has an interest in the property? one.  Debtor 1 only			aims or exemptions. Put d claims on Schedule D: ims Secured by Property.
	Other information:	134000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community propert instructions)	er	Current value of the entire property? \$4025.00	Current value of the portion you own? \$4025.00
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the property? one.  Debtor 1 only		Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community propertinstructions)	er	Current value of the entire property?	Current value of the portion you own?

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3.3	First Name         Middle Name           Make            Model:            Year:	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. But
,	Model:		Do not deduct secured of	
,	<del></del>	one.	the amount of any secure	ed claims on <i>Schedule D:</i>
		Debtor 1 only	•	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
1		At least one of the debtors and another		<u> </u>
		Check if this is community property (see		
		instructions)		
3.4	Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
4	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
!	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
	/es Make	Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	the amount of any secure	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
•	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
,	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		·
		Check if this is community property (see instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
	Model:	one.	The state of the s	ed claims on Schedule D:
•	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	
	Other information:		onino proporty :	portion you own?
	Other information:	At least one of the debtors and another		portion you own?
	Other information:	T = '		portion you own?

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Debtor 1	Crystal First Name		liams-Mickle Name	Case number (if known)	
Part 3:		four Personal and Household Items	Ivanie		
		ave any legal or equitable interest in a	any of the following	g items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	-	s and furnishings bliances, furniture, linens, china, kitchenware			
	escribe	Misc household goods			\$400.00
7. Electi Exampl		s and radios; audio, video, stereo, and digital equipr	ment; computers, printers	, scanners; music	
✓ Yes. D	escribe	Misc Electronics			\$250.00
		lue and figurines; paintings, prints, or other artwork; boo bin, or baseball card collections; other collections, m	•	objects;	
Yes. D	escribe				
	les: Sports, pl	orts and hobbies notographic, exercise, and other hobby equipment; b ks; carpentry tools; musical instruments	oicycles, pool tables, golf o	clubs, skis; canoes	
Yes. D	escribe				
10. Firea Examp		les, shotguns, ammunition, and related equipment			
Yes. D	escribe				
_		clothes, furs, leather coats, designer wear, shoes, a	ccessories		
No Yes. □	escribe	Misc Clothes			\$200.00
12. Jewe Exampl	•	ewelry, costume jewelry, engagement rings, weddin	g rings, heirloom jewelry,	watches, gems,	<del></del>
✓ Yes. D	escribe	Misc Costume Jewelry			\$200.00
Examp  No	_	ls s, birds, horses			
Yes. D	escribe				
_	other persor	nal and household items you did not already list	t, including any health a	aids you did not list	
✓ No Yes. □	escribe				
_		alue of all of your entries from Part 3, including	any entries for nages y	ou have attached	
		number here		_	\$1050.00

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Deb	tor 1	Crystal		Williams-Mickle	Case number (if known)	
		First Name	Middle Name	Last Name		
Part	4:	Describe Your I	Financial Assets			
Do	you	own or have a	ny legal or equitable int	erest in any of the follow	ing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Cash					
E		oles: Money you have	e in your wallet, in your home, in a	safe deposit box, and on hand whe	n you file your petition	
		No				
	Ш	Yes			Cash:	
17.	Exa			; certificates of deposit; shares in counts with the same institution, list		
	<b>✓</b>	Yes		Institution name:		
			17.1. Checking account:	Chase Bank		\$300.00
			17.2. Checking account:			
			17.3. Savings account:			_
			17.4. Savings account:			
			17.5. Certificates of deposit:			
			17.6. Other financial account:			
			17.7. Other financial account:			
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks			
			nvestment accounts with brokerag	e firms, money market accounts		
		No	Institution or issuer name:			
	Ш	Yes				
19.		-publicly traded st .LC, partnership, a		ated and unincorporated busine	esses, including an interest in	
		No				
		Yes. Give specific	Name of entity		% of ownership:	
		information about				
		them				
			-			

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Debt	or 1	Crystal	AC. III A.	Williams-Mickle	Case number (if known)	
20.	Neg	otiable instruments ir	Middle Name  orate bonds and other negotian clude personal checks, cashiers'	checks, promissory notes, and n	noney orders.	
	<b>✓</b>	No Yes. Give specific information about them	nts are those you cannot transfer  Issuer name:	to someone by signing or deliver	ing trem.	
21.	Еха		accounts RA, ERISA, Keogh, 401(k), 403(b)	), thrift savings accounts, or other	pension or profit-sharing plans	
		No	Type of account:	Institution name:		
	Ш	Yes. List each account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa	mples: Agreements vapanies, or others	prepayments deposits you have made so that yo with landlords, prepaid rent, publi	c utilities (electric, gas, water), tel	m a company ecommunications	
		No Yes		Institution name:		
	Ч	165	Electric:	_		
			Gas:			
			Heating oil:			
			Security deposit on rental unit:  Prepaid rent:	-		
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Ann	uities (A contract for	r a periodic payment of money to	you, either for life or for a number	of years)	
		No Yes	Issuer name and description:	,	, ,	

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Debt	or 1 Crystal First Name	Williams-Mickle  Middle Name  Last Name	Case number (if known)	
24.	Interests in an education IRA, in	an account in a qualified ABLE program, o	or under a qualified state tuition program	
	26 U.S.C. §§ 530(b)(1), 529A(b), an	id 529(b)(1).		
	✓ No Institution name and Yes	description. Separately file the records of any ir	terests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future intere exercisable for your benefit	sts in property (other than anything listed	in line 1), and rights or powers	
	<b>✓</b> No			
	Yes. Describe			
26.	Patents convigate trademarks	trade secrets, and other intellectual prope	****	
20.		vebsites, proceeds from royalties and licensing	•	
	✓ No			7
	Yes. Describe			
27.	Licenses, franchises, and other g	general intangibles		
		ve licenses, cooperative association holdings,	liquor licenses, professional licenses	
	✓ No			
	Yes. Describe			
Moi	ney or property owed to you	1?		Current value of the
	, p,,			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			ciains of exemptions.
	No			
	Yes. Give specific information about them, including whet	ANTICIPATED 2016 Refund	Federal:	\$2391.00
	you already filed the returns and the tax years		State:	\$0.00
			Local:	\$0.00
29.	Family support  Examples: Past due or lump sum alim	nony, spousal support, child support, maintenan	ce, divorce settlement, property settlement	
	<b>✓</b> No			
	Yes. Give specific information		Alimony:	\$0.00
	'			
	·		Maintenance:	\$0.00
	·		Maintenance: Support:	\$0.00 \$0.00
	·			·
	·		Support:	\$0.00
30.	Other amounts someone owes yo		Support:  Divorce settlement:  Property settlement:	\$0.00 \$0.00
30.	Other amounts someone owes yo Examples: Unpaid wages, disability in	<b>u</b> nsurance payments, disability benefits, sick pay npaid loans you made to someone else	Support:  Divorce settlement:  Property settlement:	\$0.00 \$0.00
30.	Other amounts someone owes yo Examples: Unpaid wages, disability in Social Security benefits; u	nsurance payments, disability benefits, sick pay	Support:  Divorce settlement:  Property settlement:	\$0.00 \$0.00
30.	Other amounts someone owes yo Examples: Unpaid wages, disability ir Social Security benefits; u	nsurance payments, disability benefits, sick pay	Support:  Divorce settlement:  Property settlement:	\$0.00 \$0.00

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Deb	tor 1 Crystal	Williams-Mickle	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies	alth aguings account (USA); aradit hamas	waarla or rantaria inguranga	
	Examples: Health, disability, or life insurance; hea	aim savings account (HSA), credit, nomeo	whers, or renters insurance	
	✓ No			
	Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value			
	, ,			
		-		
22	Any interest in preparty that is due you from	someone who has died		
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect p		currently entitled to receive	
	property because someone has died.	proceeds from a line insurance policy, or are	carrerray critica to receive	
	✓ No			
	Yes. Describe			
00				
33.	Claims against third parties, whether or not y Examples: Accidents, employment disputes, insu		and for payment	
	Examples: Accidents, employment disputes, insu	nance claims, or rights to suc		
	✓ No			
	Yes. Describe			
34.	Other contingent and unliquidated claims of	f every nature, including counterclaims	s of the debtor and rights	
	to set off claims			
	<b>✓</b> No			
	Yes. Describe			
	Too. Doornoo			
35.	Any financial assets you did not already list			
	No.			
	✓ No			
	Yes. Describe			
36.	Add the dollar value of all of your entries from	m Part 4, including any entries for page	es you have attached	\$2691.00
	for Part 4. Write that number here		<b>&gt;</b>	Ψ2001.00
Part	5: Describe Any Business-Related F	Property You Own or Have an In	terest In. I ist any real estate	in Part 1.
				iii i uit ii
37.		terest in any business-related property		Current volue of the
	✓ No. Go to Part 6.			Current value of the ortion you own?
	Yes. Go to line 38.			Oo not deduct secured claims
	_			r exemptions
38.	Accounts receivable or commissions you alre	eady earned		
	_	•		
	✓ No			
	Yes. Describe			
00	Office annihum and formulation			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software		ruge telephonee deeke chaire electro	nic devices
		s, moderns, printers, copiers, rax machines,	rugs, telephones, desks, challs, electro	IIIU UEVIUES
	✓ No			
	Yes. Describe			

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Deb	tor 1	Crystal	Williams-N	lickle Case number (if known	))	
40.	Mad	First Name  chinery, fixtures, ed	Middle Name Last Name uipment, supplies you use in business, and too	ls of your trade		
		No	, , , , , , , , , , , , , , , , , , , ,	• <del></del>		
		Yes. Describe				
	_					
41.	Inve	entory				
		No				
		Yes. Describe				
42.	Inte	erests in partnersh	ps or joint ventures			
	<b>✓</b>	No				
		Yes. Give specific	Name of entity:	% of owr	nership:	
		information about them				
43. <b>(</b>	Custo	omer lists, mailing	lists, or other compilations			
	<u> </u>					
	Ц	Yes. Do your lists in	clude personally identifiable information (as defined	in 11 U.S.C. § 101(41A))?		
		☐ No	ı			
		Yes. Desc	ibe			
44.	Any	/ business-related	roperty you did not already list			
	<b>✓</b>	No				
		Yes. Give specific				
		information				
					ſ	
			I of your entries from Part 5, including any entr here		▶	
Dow	· C-	Describe Any I	arm- and Commercial Fishing-Related	Property You Own or Have	an Interest In	
Part	0:	If you own or have a	interest in farmland, list it in Part 1.			
46.	Do	you own or have a	ny legal or equitable interest in any farm- or cor	nmercial fishing-related property?		
	<b>✓</b>	No. Go to Part 7.				Current value of the portion you own?
		Yes. Go to line 47.				Do not deduct secured
						claims or exemptions
47.		m animals				
	Exa	amples: Livestock, po	ultry, farm-raised fish			
	V	No				
	Ц	Yes. Describe				

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Deb	tor 1 Crystal	Middle Nove	Williams-Mickle	Case number (if known)	
40	First Name	Middle Name	Last Name		
48.	Crops-either growing	or narvested			
	<b>✓</b> No				
	Yes. Describe				
49.	Farm and fishing equir	 oment, implements, machinery, fixtur	es and tools of trade		
٦٥.	_	omenc, implemento, maeriniery, natar	cs, and tools of trade		
	✓ No				
	Yes. Describe				
				l	
50.	Farm and fishing supp	lies, chemicals, and feed			
	✓ No				
	Yes. Describe				
	Tes. Describe				
	-			•	
51.	Any farm- and commer	cial fishing-related property you did ı	not already list		
	<b>✓</b> No				
	Yes. Describe				
				г	
52. A	dd the dollar value of all	of your entries from Part 6, including	g any entries for pages ye	ou have attached	
for P	art 6. Write that number	here		<b>&gt;</b>	
				_	
Part	7: Describe All Pro	operty You Own or Have an Int	terest in That You Di	d Not List Above	
53.		perty of any kind you did not already			
		s, country club membership			
	✓ No				
	Yes. Give specific				
	information				
54 A	dd the dollar value of all	of your entries from Part 7. Write tha	it number here	•	
	au ino donar varao or an				
Part	8: List the Totals of	of Each Part of this Form			,
55 F	Part 1: Total real estate. I	ine 2		•	
00.1	urt ir rotarroar ootato, i				
56. p	part 2 total vehicles, line	5	\$4025.00		
			<del>94023.00</del>		
57.P	art 3: Total personal and	d household items, line 15	\$1050.00		
58. <b>P</b>	art 4: Total financial ass	ets, line 36	\$2691.00		
59. <b>F</b>	Part 5: Total business-re	elated property, line 45			
ου. <b>F</b>	-ait o: Total farm- and fi	shing-related property, line 52			
61. <b>F</b>	Part 7: Total other prope	rty not listed, line 54			
62. 1	Total personal property.	Add lines 56 through 61	\$7766.00		, \$7700 OO
	, property.	<del> </del>	\$7766.00	Copy personal property total ▶	+ \$7766.00
				<u> </u>	<b>A</b>
	otal of all property on S	chedule A/B. Add line 55 + line 62			\$7766.00
	viai vi aii biobelty on 50	LITEGUIE AVD. AUU IIITE 33 + IIITE 62			1

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Fill in this information to identify your case:							
Debtor 1	Crystal		Williams-Mickle				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	g) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois				
			(State)				
Case number (If known)							

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description:  Misc Clothes  Line from Schedule A/B: 11	\$200.00	\$200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)			
	Brief description:  Misc household goods  Line from Schedule A/B: 06	\$400.00	\$400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every)  No  Yes. Did you acquire the property covery  No Yes	3 years after that for ca					

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ebtor 1	Crystal		Williams-Mickle	Case number (if known)	
	First Name Midd	le Name	Last Name		
rt 2:	Additional Page				
line	f description of the property and on Schedule A/B that lists this perty	Current value of the portion you own		emption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B			
Brief	f	****			735 ILCS 5/12-1001(b)
	cription:	\$300.00	ightharpoons	\$300.00	
	Chase Bank		100% of fair ma	arket value, up to any	•
	from edule A/B: 17		applicable state	utory limit	
Brief	f				735 ILCS 5/12-1001(b)
	cription:	\$250.00	$\checkmark$	\$250.00	
	Misc Electronics		100% of fair ma	arket value, up to any	•
Line Sche	from edule A/B:07		applicable state	utory limit	
Brief	f		_		735 ILCS 5/12-1001(b)
desc	cription:	\$200.00	$\checkmark$	\$200.00	
	Misc Costume Jewelry		100% of fair ma	arket value, up to any	•
	from edule A/B: 12		applicable state		
Brief		\$2.391.00			735 ILCS 5/12-1001(g)(1)
	cription:	φ2,391.00	$\checkmark$	\$2,391.00	
	ANTICIPATED 2016 Refund			arket value, up to any	•
	from		applicable stati	utory limit	

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			· ·			
Fill in this	information to identify your case	:				
Debtor 1	Crystal		Williams-Mickle			
	First Name	Middle Name	Last Name			
Debtor 2	w. eu					
(Spouse,	if filing) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	Northern	District of Illinois			
Case nun	phor		(State)			
(If known)			_			
Offici	al Form 106D					Check if this is a amended filing
Sche	dule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	pertv	12/1
Part 1:  2. List for	Yes. Fill in all of the information but List All Secured Claims tall secured claims. If a credito	nis form to the court with you below. or has more than one secu- editor has a particular claim	red claim, list the creditor separately a, list the other creditors in Part 2. As and to the creditor's name.	else to report on this f  Column A  Amount of claim  Do not deduct the	Column B  Value of collateral	Column C Unsecured portion
				value of collateral.	that supports this claim	If any
	AC/MI105 editor's Name	Describe the property	that secures the claim:	\$13,419.00	\$4,025.00	\$9,394.00
<u>37</u>	18 STADIUM DR Number Street  LAMAZOMichigan 49008	050 Automobile  As of the date you file,  Contingent  Unliquidated	the claim is: Check all that apply.			
City	/ State ZIP Code	Disputed				
Wŀ	no owes the debt? Check one.  Debtor 1 only	Nature of lien. Check a	ill that apply.			
	Debtor 2 only Debtor 1 and Debtor 2 only	car loan)	nade (such as mortgage or secured as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from	,			
	Check if this claim relates	Other (including a ri				
	to a community debt te debt was <u>4/1/2016</u> urred	Last 4 digits of accou	,			
	Add the dollar value of y	your entries in Column	A on this page. Write that	\$13,419.00		

number here:

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Fill	in this inform	ation to identify your cas	e:					
Deb	otor 1	Crystal		Williams-Mickle				
		First Name	Middle Name	Last Name	=			
	otor 2		N.C. 1 11 N.		_			
(Sp	ouse, it filing	First Name	Middle Name	Last Name				
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illinois	_			
Car	se number			(State)				
	nown)				-			
Of	ficial F	orm 106E/F				Ch	eck if this is ar	n amended filing
			ditara Mha	Hava Haaaau	ad Claima			
<u> </u>	neau	ile E/F: Cre	editors who	Have Unsecur	ed Claims			12/15
106Å that entri knov	VB) and on are listed in es in the bo vn).	Schedule G: Executor a Schedule D: Creditor exes on the left. Attach	y Ċontracts and Unexpire s Who Hold Claims Secui	result in a claim. Also list exec d Leases (Official Form 106G). red by Property. If more space this page. On the top of any a	Do not include any cre is needed, copy the Pa	editors with art you nee	n partially sec ed, fill it out, n	cured claims number the
1.			secured claims against ye					
٠٠.		o to Part 2.	iscourca olaimis against y	, u.				
	Yes.							
2.	List all of listed, iden much as po Continuation	tify what type of claim it is ossible, list the claims in on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecured of and nonpriority amounts, list that of to the creditor's name. If you have particular claim, list the other cred or this form in the instruction book	claim here and show both re more than two priority itors in Part 3.	n priority and	d nonpriority ar	mounts. As
						Total claim	Priority amount	Nonpriority amount

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		Iliams-Mickle Case number (if known) t Name	
Part 2			
3. [	Oo any creditors have nonpriority unsecured claims against you		
l ł	<ul><li>No. You have nothing to report in this part. Submit this form to the</li><li>Yes.</li></ul>	e court with your other schedules.	
		landar of the graditer rule helds each plains if a graditer has mare t	han ana nriaritr
		I order of the creditor who holds each claim. If a creditor has more t claim listed, identify what type of claim it is. Do not list claims already inc	
lí	more than one creditor holds a particular claim, list the other creditor	rs in Part 3.If you have more than four priority unsecured claims fill out the	
F	Page of Part 2.		
	A FAMILIANO		Total claim
4.1	AFNI, INC. Nonpriority Creditor's Name	Last 4 digits of account number 6492	\$689.00
	PO BOX 3427	When was the debt incurred? 4/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	BLOOMINGTON Illinois 61702	Contingent	
	BLOOMINGTON Illinois 61702 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 1 only  Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a community debt	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No		
	Yes	Other. Specify <u>NETWORK</u>	
4.2	AFNI, INC.	- Last 4 digits of account number 3723	\$71.00
	Nonpriority Creditor's Name PO BOX 3427	When was the debt incurred? 5/1/2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.  Contingent	
	BLOOMINGTON Illinois 61702 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt  Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify ORIGINAL CREDITOR: AT T	
	Yes	Outer Specify Ottoman Chebiton, At 1	
4.3	AT&T Mobility	Last 4 digits of account number	\$1,800.00
	Nonpriority Creditor's Name PO Box 6416	When was the debt incurred?	<u> </u>
	Number Street	<u></u>	
		As of the date you file, the claim is: Check all that apply.  Contingent	
	0 10 000	Unliquidated	
	Carol Stream     Illinois     60197       City     State     Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only  Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		

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Debto		Nilliams-Mickle Case number (if known)  ast Name				
Part 2	2: Your NONPRIORITY Unsecured Claims - Conti	nuation Page				
	After listing any entries on this page, number them beginning	•	Total claim			
4.4	City of Chicago Department of Revenue	Last 4 digits of account number	\$7,818.00			
	Nonpriority Creditor's Name 121 North LaSalle Street	When was the debt incurred?				
	Number Street	<del></del>				
		As of the date you file, the claim is: Check all that apply.  Contingent				
	OL: NV COORD	Unliquidated				
	ChicagoIllinois60602CityStateZip Code	Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	Student loans				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	─ debts  ✓ Other. Specify  DUE				
	Is the claim subject to offset?	Turior. Openiny				
	Yes					
4.5	ComEd		<b>#4 400 00</b>			
4.5	Nonpriority Creditor's Name	Last 4 digits of account number	\$1,400.00			
	3 Lincoln Center Number Street	When was the debt incurred?n/a				
	Bankruptcy Section	As of the date you file, the claim is: Check all that apply.				
	Bankiupicy decitori	Contingent				
	Oakbrook Terrace Illinois 60181	Unliquidated				
	City State Zip Code Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	✓ Other. Specify				
	✓ No					
	Yes					
4.6	DIV ADJ SERV	Last 4 digits of account number 0475	\$783.00			
	Nonpriority Creditor's Name 600 COON RAPIDS BV	When was the debt incurred? 4/1/2016				
	Number Street	<u> </u>				
		As of the date you file, the claim is: Check all that apply.  Contingent				
	COON RAPIDS Minnesota 55433	Unliquidated				
	City State Zip Code Who incurred the debt? Check one.					
	✓ Debtor 1 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar				
	Is the claim subject to offset?	debts  Collection; Collecting for				
	<b>✓</b> No	ORIGINAL CREDITOR: 11				
	Yes	Other. Specify SPRINT				

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Williams-Mickle Debtor 1 Crystal Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** ENHANCED RECOVERY CO I 4.7 \$195.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: ĂT T Yes 4.8 JOHN M GALICH ESQ LLC \$3,850.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10075w W Lincoln Hwy As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60423 Frankfort City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt **Eviction** Other. Specify Is the claim subject to offset? **✓** No Yes Markoff Law \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 29 N Wacker Drive #550 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60606 State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify DUE Is the claim subject to offset? **✓** No

Yes

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Williams-Mickle Debtor 1 Crystal Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Nicor - PO Box 5407 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5407 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt DUE ✓ Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.11 Peoples Gas \$800.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60601 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify \_ DUE Is the claim subject to offset? **✓** No Yes 4.12 RECOVERY ONE LLC \$338.00 Last 4 digits of account number 0757 Nonpriority Creditor's Name 3240 HENDERSON RD When was the debt incurred? 5/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43220 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: IGS  $\overline{\mathbf{V}}$ **✓** No **ENERGY** Other. Specify ☐ Yes

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Williams-Mickle Debtor 1 Crystal Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 SAFCO \$9,888.00 Last 4 digits of account number Nonpriority Creditor's Name 6700 N Andrews Ave # 5 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Florida 33309 Fort Lauderdale Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify 066 Automobile **✓** No Yes U S Dept Of Ed/fisl/ch 4.14 \$4,478.00 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name When was the debt incurred? Po Box 65128 Number As of the date you file, the claim is: Check all that apply. Contingent 55165 Saint Paul Minnesota Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.15 U S Dept Of Ed/fisl/ch \$3,513.00 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name Po Box 65128 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Saint Paul Minnesota 55165 Unliquidated City State 7in Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify\_ **✓** No

Yes

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Debtor		Villiams-Mickle Case number (if known) ast Name				
Part 2:						
rait 2	After listing any entries on this page, number them beginning	•	Total claim			
4.16	U S Dept Of Ed/fisl/ch	Last 4 digits of account number 8650	\$2,928.00			
	Nonpriority Creditor's Name Po Box 65128	When was the debt incurred?				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Saint Paul Minnesota 55165 City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	✓ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?  No	Other. Specify				
	☐ Yes					
4.17	U S Dept Of Ed/fisl/ch	Local Admits of account number 0007	\$2,192.00			
	Nonpriority Creditor's Name Po Box 65128	Last 4 digits of account number 8637  When was the debt incurred? n/a				
	Number Street	<u> </u>				
		As of the date you file, the claim is: Check all that apply.				
	Saint Paul Minnesota 55165	Contingent				
	City State Zip Code Who incurred the debt? Check one.	Unliquidated				
	Debtor 1 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>				
	Is the claim subject to offset?	Other. Specify				
	✓ No					
440	VEDIZON WIDELESS		Ф0.004.00			
4.18	VERIZON WIRELESS Nonpriority Creditor's Name	Last 4 digits of account number	\$2,384.00			
	PO BOX 4002 Number Street	When was the debt incurred? 9/1/2014				
	Nambol Street	As of the date you file, the claim is: Check all that apply.				
	Acworth Georgia 30101	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.  Debtor 1 only	<ul> <li>□ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar</li> </ul>				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another					
	Check if this claim relates to a community debt					
	Is the claim subject to offset?	debts				
	✓ No	Other. Specify001 UnknownLoanType				
	Yes					

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Debtor		Williams-Mickle Case number (if known)				
	First Name Middle Name	Last Name				
Part 2:	Your NONPRIORITY Unsecured Claims - Cont	tinuation Page				
	After listing any entries on this page, number them begin	ning with 4.5, followed by 4.6, and so forth.	Total claim			
4.19	Verizon Wireless - Bankruptcy Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	500 Technology Drive, Suite 550	When was the debt incurred?n/a				
	Number Street  Saint Charles Missouri 63304 City State Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only  Debtor 1 and Debtor 2 only	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>				
	At least one of the debtors and another	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts				
	Is the claim subject to offset?	Other. Specify				
	✓ No ☐ Yes					
4.20	WORLD FINANCE CORPORAT Nonpriority Creditor's Name 5519 EAST 82ND STREET Number Street  INDIANAPOLIS Indiana 46250 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?	Last 4 digits of account number	\$476.00			
	✓ No  Yes	Other. Specify 007 InstallmentLoan				

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Williams-Mickle Debtor 1 Crystal Case number (if known) Middle Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that 6d. amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$13,111.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$30,892.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$44,003.00

6j.

6j. Total. Add lines 6f through 6i.

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Fill in this infor	mation to identify your cas	e:		
Debtor 1	Crystal		Williams-Mickle	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)	-			
(II KIIOWII)				
Official	Form 106G			Check if this is at amended filing
Schedu	le G: Execut	ory Contract	s and Unexpir	red Leases 12/1
	ed, copy the additional p			are equally responsible for supplying correct information. If more this page. On the top of any additional pages, write your name
1. Do you l	nave any executory	contracts or unexpi	red leases?	
✓ No. Ch	eck this box and file this fo	orm with the court with your o	other schedules. You have not	othing else to report on this form.
Yes. Fi	ll in all of the information b	elow even if the contracts of	r leases are listed on Schedul	dule A/B: Property (Official Form 106A/B).
				Then state what each contract or lease is for (for example, rent, re examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this infor	mation to identify your cas	se:		
Debtor 1	Crystal		Williams-Mickle	_
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filin	(1) First Name	Middle Name	Last Name	_
(0)0000,	9/ Filst Name	Middle Name	Lastiname	
United States B	Bankruptcy Court for the:	Northern	District of Illinois	_
Case number			(State)	
(If known)				
				Check if this is an amended filing
Official	Earm 1064			amended illing
	Form 106H			
Schedu	le H: Your C	odebtors		12/15
1. Do you ha	ave any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a codeb	tor.)
Idaho, Lou No. 0	isiana, Nevada, New Mex Go to line 3.	ico, Puerto Rico, Texas, Was	shington, and Wisconsin.)	nunity property states and territories include Arizona, California,
	•	pouse, or legal equivalent liv	re with you at the time?	
	No Yes. In which community	state or territory did you live?	Fill in the	e name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equiv	ralent	
	Number Street			
	City	State	Zip Code	
again as a	codebtor only if that p	erson is a guarantor or co	signer. Make sure you have li	spouse is filing with you. List the person shown in line 2 isted the creditor on <i>Schedule D</i> (Official Form 106D), <i>D, Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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				3			
Fill in this	s information to identif	y your case:					
Debtor 1	Crystal		Williams-	Mickle			
	First Name	Middle Name	Last Nam	Э	_	0. 1.7.1.	
Debtor 2	(III )				_	Check if this is:	
(Spouse, if	filing) First Name	Middle Name	Last Nam	Э		An amended filing	
United Stat	es Bankruptcy Court for the:	Northern	_ District of Illinoi	S	_	A supplement showing post-petition char expenses as of the following date:	oter 13
Case numb	ner.		(State	<del>)</del> )		expenses as of the following date.	
(If known)					_	MM / DD / YYYY	
Officia	al Form 106I						
	lule I: Your Inc	come					12/15
	Il pages, write your na			nswer eve	ery question		_
	Fill in your employment information.		Debtor 1			Debtor 2	
		Employment status	✓ Employed			Employed	
	If you have more than one job,		Not Emplo	yed		Not Employed	
	attach a separate page with	Occupation	_			_	
	information about additional employers.	·				- , -	_
		Employer's name	Aperion Care	Jak Lawn		_	_
	Include part time, seasonal, or	Employer's address	9401 S. Ridgeland Ave Number Street			Number Street	
	self-employed work.		ramber ducet			Number exect	
	Occupation may include						
	student or homemaker, if it applies.						_
	от потполнатог, и и аррисог		Oak Lawn City	Illinois State	60453 Zip Code	City State Zip Code	_
			Oity	Oldio	Zip Oodo		
		How long employed there?					
Part 2:	Give Details About	Monthly Income					
		,					
Estimate you are se	-	date you file this form. If yo	ou have nothing to	report for any	line, write \$0 in	the space. Include your non-filing spouse unle	ess
	our non-filing spouse have mo eparate sheet to this form.	ore than one employer, combi	ne the information	for all employe	ers for that perso	on on the lines below. If you need more space,	,
				For D	ebtor 1	For Debtor 2 or non-filing spouse	
	monthly gross wages, salar				\$1,842.21		
	mate and list monthly over		3.		+ \$0.00		

\$1,842.21

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Crystal First Name		Villiams-Mickle ast Name	Case number	(if known)	
riiotitailie	imadio Namo		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		<b>→</b> 4	\$1,842.21		
5. List all payroll deductions					
5a. Tax, Medicare, and So		5a.	\$227.24		
5b. Mandatory contribution	•	5b.	\$0.00		
5c. Voluntary contribution	ns for retirement plans	5c.	\$0.00		
5d. Required repayments	of retirement fund loans	5d.	\$0.00		
5e. Insurance		5e.	\$0.00		
5f. Domestic support obl	igations	5f.	\$0.00		
5g. Union dues		5g.	\$21.99		
· ·	ecify:	-	\$0.00	+	
·	us. Add lines 5a + 5b + 5c + 5d + 5e +5f +	_	\$249.23		
+5h.	3.7 dd iinios 6d 7 65 7 66 7 6d 7 66 7 61 7	og o. <u> </u>	ΨΣ-10.20		
7. Calculate total monthly tal	<b>ke-home pay.</b> Subtract line 6 from line 4.	7. <u> </u>	\$1,592.98		
8. List all other income regul	•				
business, profession,	al property and from operating a , or farm each property and business showing gross	;			
	ecessary business expenses, and the total		\$0.00		
8b. Interest and dividend	s	8b.	\$0.00		
8c. Family support paymo dependent regularly re	ents that you, a non-filing spouse, or a eceive	1			
Include alimony, spousa divorce settlement, and p	I support, child support, maintenance, property settlement.	8c. <u> </u>	\$0.00		
8d. Unemployment comp	ensation	8d	\$0.00		
8e. Social Security		8e	\$0.00		
Include cash assistance : assistance that you receithe Supplemental Nutritisubsidies	sistance that you regularly receive and the value (if known) of any non-cash ive, such as food stamps (benefits under ion Assistance Program) or housing		•		
Specify: Food Assistance		8f	\$1,169.00		
8g. Pension or retirement		8g	\$0.00	-	
8h. Other monthly income		8h. +	\$0.00	+	
9. Add all other income Add	lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8l	h. 9. <u> </u>	\$1,169.00		
10. Calculate monthly income Add the entries in line 10 fo	<b>e.</b> Add line 7 + line 9. r Debtor 1 and Debtor 2 or non-filing spou	10	\$2,761.98	+	= \$2,761.98
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .					
Specify:					11. + \$0.00
	ast column of line 10 to the amount in lammary of Schedules and Statistical Sumn				12. \$2,761.98
	say as a successful su	,			Combined monthly income
	se or decrease within the year after you	ı file this form?			y moonie
No.					
Yes. Explain:					

			Doce	iniciti Tage 30 of 03	•	
Fill in this inform	nation to identify y	our case:				
Debtor 1	Crystal			Williams-Mickle		
	First Name		Middle Name	Last Name		
Debtor 2 (Spouse, if filing	) First Name		Middle Name	Last Name	Check if this is:	
					An amended filin	
United States Ba	ankruptcy Court f	or the: N	lorthern	District of Illinois (State)		nowing post-petition chapter 13 he following date:
Case number (If known)						
(II KIIOWII)					MM / DD / YYY	Y
Official F	Form 10	<u>6J</u>				
Schedul	e J: You	r Exp	enses			12/1
information. If n (if known). Answ	nore space is no ver every quest	eeded, atta ion.	ach another sheet to this	re filing together, both are equally s form. On the top of any additiona		
	ribe Your Ho	usehold	d			
1. Is this a join						
✓ No. Go	to line 2					
Yes. Do	es Debtor 2 live	e in a sepa	rate household?			
	No					
	Yes. Debtor 2	must file Of	fficial Forms 106J-2, <i>Expe</i>	nses for Separate Household of Debt	or 2.	
2. Do you have dependents?	•	☐ No				
Do not list De Debtor 2.	ebtor 1 and		Fill out this information for dependent	Dependent's relationship to	Dependent's	Does dependent live
Debiol 2.		Caciro	иерениенк 	Debtor 1 or Debtor 2 Child	<b>age</b> 17 years	with you? No.
				<u></u>		✓ Yes.
				Child	16 years	No.
				Child	15 voors	✓ Yes.  No.
				Cillia	15 years	✓ Yes.
				Child	14 years	No.
				<b></b>		✓ Yes.
				Child	10 years	No. ✓ Yes.
				Child	8 years	No.
						✓ Yes.
				Child	6 years	☐ No.  ✓ Yes.
3. Do your exp		<b>✓</b> No				<u></u>
than	people other	Yes				
yourself and dependents						
			onthly Expenses			
	f a date after th			you are using this form as a supp pplemental Schedule J, check the		
				e if you know the value of ne (Official Form B 106l.)		Your expenses
	or home owners the ground or lot		ses for your residence. I	nclude first mortgage payments and		<b>\$200.00</b>
Official Form	ıded in line 4:		\$	Schedule J: Your Expenses		page 1
4a. Real es	tate taxes					43 \$0.00

4b.

\$0.00

4b. Property, homeowner's, or renter's insurance

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Debter: 1Homestalaintenance, repair, and upkeep expenses Williams-Mickle Case number (if known) First Name  Last Name	4c.	<del>\$0.00</del>
4d. Homeowner's association or condominium dues	4d.	\$0.00
		Your expenses
s. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.0
5. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$400.0
6b. Water, sewer, garbage collection	6b.	\$0.0
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$220.0
6d. Other. Specify:	6d	\$0.0
7. Food and housekeeping supplies	7.	\$1,250.0
3. Childcare and children's education costs	8.	\$0.0
). Clothing, laundry, and dry cleaning	9.	\$225.0
0. Personal care products and services	10.	\$225.0
1. Medical and dental expenses	11.	\$0.0
Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments	12.	\$250.0
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.0
4. Charitable contributions and religious donations	14.	\$0.0
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a	\$0.0
15b. Health insurance	15b	\$0.
15c. Vehicle insurance	15c	<b>\$0.</b>
15d. Other insurance. Specify:	15d	<b>\$0.</b>
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.
7. Installment or lease payments:	16	
17a. Car payments for Vehicle 1	17a	\$0.
17b. Car payments for Vehicle 2	17b	\$0.
17c. Other. Specify:	17c	\$0.
17d. Other. Specify:		\$0.
8. Your payments of alimony, maintenance, and support that you did not report as deducted from	17d	
your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.	\$0.
9.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.
O.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.
20b. Real estate taxes.	20b	\$0
20c. Property, homeowner's, or renter's insurance	20c	<b>\$0</b> .
20d. Maintenance, repair, and upkeep expenses.	20d	\$0.
20e. Homeowner's association or condominium dues	20e	\$0.

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Debtor 1	Crystal		Williams-Mickle	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	Specify:				21	\$0.00
22. <b>Calc</b> ı	ılate your monthly	expenses.				\$2,770.00
22a. <i>A</i>	Add lines 4 through	21.				\$0.00
22b. 0	Copy line 22 (month	ly expenses for Debtor 2), if any, fro	m Official Form 106J-2			\$2,770.00
22c. A	odd line 22a and 22b	b. The result is your monthly expens	ses.		22.	
23.Calcu	late your monthly	net income.				
23a. C	Copy line 12 (your co	ombined monthly income) from Sch	edule I.		23a	\$2,761.98
23b. C	Copy your monthly e	expenses from line 22 above.			23b	\$2,770.00
	•	ly expenses from your monthly incor	ne.			(\$8.02)
	The result is your m	nonthly net income.			23c	
24. <b>Do y</b> o	ou expect an incre	ease or decrease in your expense	es within the year after you f	ile this form?		
		oect to finish paying for your car loar crease or decrease because of a m				
1	No					
	/es					
	Explain he	ere:				

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Fill in this information to identify your case:										
Debtor 1	Crystal		Williams-Mickle							
	First Name	Middle Name	Last Name							
Debtor 2										
(Spouse, if filing	g) First Name	Middle Name	Last Name							
United States E	Bankruptcy Court for the:	Northern	District of Illinois							
Case number (If known)			(State)							

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary ar	and schedules filed with this declaration and
	that they are true and correct.	a solicules lied with this declaration and
×	/s/ Crystal Williams-Mickle	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 10/28/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in this infor	mation to identify your cas	se:				
Debtor 1	Crystal	Middle Na	Williams			
Debtor 2	First Name	Middle Na	ame Last Nam	ne		
	g) First Name	Middle Na	ame Last Nam	ne		
United States	Bankruptcy Court for the:	Northern	District of Illino	ois		
Case number			(Star	te)		
(If known)						
Official	Form 107					Check if this is ar amended filing
	<del>.</del>	ial Affairs	for Individua	als Filing for Ba	ankruptcv	12/15
Be as complet space is need question.	e and accurate as poss	ible. If two married eet to this form. On	people are filing togethe the top of any additiona	er, both are equally responsi al pages, write your name and	ble for supplying o	correct information. If more
	s your current marital st		and Whole fou El	iou Bolore		
✓ Ma	arried					
	t married					
2. During	the last 3 years, have yo	ou lived anywhere o	ther than where you live	now?		
_		d lived allywriele o	ther than where you live	; now:		
✓ No Yes	s. List all of the places you	lived in the last 3 year	rs. Do not include where y	ou live now.		
Do	btor 1:		Dates Debtor 1 lived	Debtor 2:		Dates Debtor 2 lived
De	bioi i.		there	Debtor 2.		there
				Same as Debtor 1		Same as Debtor 1
Nu	mber Street		From	Number Street		From
			То			To
Cit	v State	Zip Code		City State	Zip Code	
	,			Same as Debtor 1		Same as Debtor 1
Nu	mber Street		From	Number Street		From
	TIDOI GUOCE		То			To
. <del></del>						
Cit	y State	Zip Code		City State	Zip Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

**✓** No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Deb	tor 1	Crystal First Name Middle			umber (if known)		
				ne			
4.	<b>Did</b> Fill i	Explain the Sources of Your I you have any income from employm n the total amount of income you receive rities. If you are filing a joint case and you No	ent or from operating a bu	sses, including part-time		ears?	
	✓	Yes. Fill in the details.	Debtor 1		Dahtar 2		
			Deptor I		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		rom January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$9846.00	Wages, commissions, bonuses, tips Operating a business		
		or last calendar year: anuary 1 to December 31, 2015 ) YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$4670.00	Wages, commissions, bonuses, tips Operating a business		
		or the calendar year before that: anuary 1 to December 31, 2014 ) YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$7546.00	Wages, commissions, bonuses, tips Operating a business		
I	Inclubene case List e	you receive any other income during de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received that source and the gross income from the No Yes. Fill in the details.	ome is taxable. Examples of terest; dividends; money colle ogether, list it only once unde	other income are alimony; chected from lawsuits; royalties; r Debtor 1.	and gambling and lottery winn		
'			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
		from January 1 of current year until he date you filed for bankruptcy:	EST YTD LINK	\$12,000.00			
		For last calendar year:  January 1 to December 31, 2015 )  YYYYY	EST TOTAL LINK	\$14,400.00			
		For the calendar year before that:  January 1 to December 31, 2014 )  YYYYY	EST TOTAL LINK	\$14,400.00			

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First Name Middle Name Last Name  tt 3: List Certain Payments You Made Before You Filed for Bankruptcy  Are either Debtor 1's or Debtor 2's debts primarily consumer debts?	
Are either Debtor 1's or Debtor 2's debts primarily consumer debts?	
Are either Debtor 1's or Debtor 2's debts primarily consumer debts?	
No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as primarily for a personal, family, or household purpose."	"incurred by an individual
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?	
No. Go to line 7.	
Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.	
* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.	
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?	
✓ No. Go to line 7.	
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid	
that creditor. Do not include payments for domestic support obligations, such as child support and	
alimony. Also, do not include payments to an attorney for this bankruptcy case.	
Detect of not mont. Total amount noid. Amount you still ave	Maa thia naymant
Dates of payment Total amount paid Amount you still owe	Was this payment for
	Mortgage
Creditor's Name	Car
Number Street	Credit card
	Loan repayment
City Chate 7in Code	Suppliers or
City State Zip Code	vendors Other
	Mortgage
Craditor's Nama	
Creditor's Name	Car
Creditor's Name  Number Street	
	Car
	Car Credit card
	Car Credit card Loan repayment
Number Street	Car Credit card Loan repayment Suppliers or
Number Street	Car Credit card Loan repayment Suppliers or vendors Other Mortgage
Number Street  City State Zip Code  Creditor's Name	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car
Number Street  City State Zip Code	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card
Number Street  City State Zip Code  Creditor's Name	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment
Number Street  City State Zip Code  Creditor's Name	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card

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ebtor 1	Crystal		W	'illiams-Mickle	Case number (	if known)
	First Name	Middle Name		st Name		
Insic corp ager	ithin 1 year before you filed for bankruptcy, did iders include your relatives; any general partners; reporations of which you are an officer, director, persent, including one for a business you operate as a sch as child support and alimony.		relatives of any son in control, o	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	ou are a general partner; curities; and any managing
<b>✓</b>	No					
Ц	Yes. List all payments to	o an insider.	Dates of	Total amount	Amount you	Reason for this payment
			payment	paid	still owe	
	Insider's Name					
	Number Street					
	City State	Zip Code				
	Insider's Name					
	Number Street					
_	City State	Zip Code				
insid Inclu	der?	uaranteed or cosigned b		Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name					
	Number Street					
_	City State	Zip Code				
	Insider's Name					
	Number Street					
	City State	Zip Code				
	Oity State	Zip Code				

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: Identify L	egal Actions,	Repossessio	ns, and Foreclos	ures			
	ers, including persor		e you a party in any l small claims actions, di				ing? or custody modifications, and
✓ No							
Yes. Fill in th	e details.	N	ature of the case	Carretan			Status of the case
Case title		N	ature of the case	Court or	agency		Pending
-				Court Nar	ne		On appeal
Case numb	ber			NumberS	treet		Concluded
				City	State	Zip Code	
Case title						-	Pending
				Court Nar	ne		On appeal
Case numb	ber			NumberS	treet		Concluded
				City	State	Zip Code	
Check all that ap	oply and fill in the de	etails below.	as any of your proper			•	ed, seized, or levied?
Check all that ap	oply and fill in the define 11.	etails below.	as any of your proper	ty repossessed, fo		•	Value of the
Check all that ap	oply and fill in the define 11.	etails below.		ty repossessed, fo		nished, attache	
Check all that ap	oply and fill in the de ine 11. the information belo	etails below.	Describe the p	repossessed, fo		nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t	oply and fill in the define 11. The information belo	etails below.		repossessed, fo		nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's	oply and fill in the define 11. The information belo	etails below.	Describe the p	ty repossessed, for property  appened as repossessed.		nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's	oply and fill in the define 11. The information belo	etails below.	Explain what I	ty repossessed, for reporty  appened as repossessed. as foreclosed.		nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's	oply and fill in the define 11. The information belo	etails below.	Explain what I	ty repossessed, for property  appened as repossessed.	preclosed, gar	nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S	oply and fill in the define 11. The information belo Name	w.	Explain what I	roperty  appened as repossessed. as foreclosed. as garnished. as attached, seized	preclosed, gar	nished, attache	Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S  City	oply and fill in the define 11. the information belo  Name  Street	w.	Explain what I  Property w Property w Property w Property w	roperty  appened as repossessed. as foreclosed. as garnished. as attached, seized	preclosed, gar	Date	Value of the property  Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S	oply and fill in the define 11. the information belo  Name  Street	w.	Explain what I  Property w Property w Property w Property w	roperty  appened as repossessed. as foreclosed. as garnished. as attached, seized	preclosed, gar	Date	Value of the property  Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S  City	oply and fill in the define 11. The information beloe  Name  Street  State	w.	Explain what I  Property w Property w Property w Property w Property w Describe the p	roperty  appened as repossessed. as foreclosed. as garnished. as attached, seized	preclosed, gar	Date	Value of the property  Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S  City  Creditor's	oply and fill in the define 11. The information beloe  Name  Street  State	w.	Explain what I  Property w	as repossessed. as garnished. as attached, seized as repossessed.	preclosed, gar	Date	Value of the property  Value of the
Check all that ap  No. Go to li  Yes. Fill in t  Creditor's  Number S  City  Creditor's	oply and fill in the define 11. The information beloe  Name  Street  State	w.	Explain what I  Property w	appened as repossessed. as foreclosed. as garnished. as attached, seized	preclosed, gar	Date	Value of the property  Value of the

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Deb	tor 1	Crystal First Name Middle Name		Williams-Mickle Last Name	Case number (if known)	-	
11.		thin 90 days before you filed for bankruptc counts or refuse to make a payment becaus			or financial institution,	set off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the cr	editor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account numl	per: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy, vointed receiver, a custodian, or another of		of your property in the pos	session of an assignee f	or the benefit of	creditors, a court-
	<b>✓</b>	No Yes					
Pari		List Certain Gifts and Contributio		an aire ann aite nith a tatal	under of many them \$600		
13.	vvi		y, ala yo	ou give any girts with a total	value of more than \$600	per person?	
		Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code Person's relationship to you					
		Person to Whom You Gave the Gift	<u> </u>				
		Number Street					
		City State Zip Code Person's relationship to you					

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Deb	tor 1	Crystal			Williams-Mickle	Case number (if known)		
		First Name		Middle Name	Last Name			
14.	Wit	hin 2 vears hefore v	ou filed for	r hankruntev did v	ou give any gifts or contributio	ns with a total value of	more than \$600 t	to any charity?
1-7-			ou meu ioi	i banki uptcy, did j	ou give any gins or contribution	iis with a total value of	more than \$000	to arry criarity:
		No						
	Ш	Yes. Fill in the details	s for each g	jift or contribution.				
		Gifts or contributi		rities	Describe what you contribute	ted	Date you	Value
		that total more tha	n \$600				contributed	
		Charity's Name						
				_				
		Number Street		_				
		City	State	Zip Code				
Part	6:	List Certain Los	ses					
15.			u filed for l	bankruptcy or sind	ce you filed for bankruptcy, did y	ou lose anything beca	use of theft, fire,	other disaster, or
	gam	ıbling?						
	<b>✓</b>	No						
		Yes. Fill in the details	3.					
		Describe the prop	erty you lo	st and	Describe any insurance cov	erage for the loss	Date of your	Value of property
		how the loss occu			Include the amount that insurar		loss	lost
					pending insurance claims on li	ne 33 of Schedule		
					A/B: Property.			
		No Yes. Fill in the details		miori proparoro, or c	redit counseling agencies for servi	oco roquirou irryour burii	афюу.	
		res. I ili ili tile detalle	<i>,</i> .		Decement on and value of an		Data was sure and	Amazzut af
					Description and value of any transferred	y property	Date payment or transfer	Amount of payment
					i.u.i.c.o.r.cu		was made	paymont
		Semrad Law Firm			Attorney's Fee - 0.00		10/28/2016	\$0.00
		Person Who Was Pa	aid		7 Morriey 81 de 0.00		10/20/2010	ψ0.00
		11101 S. Western Av	enue					
		Number Street						
			Illinois	60643				
		City	State	Zip Code				
		Email or website ad	dress					
		None	u. 000					
		Person Who Made t	he Payment	t, if Not You				
			-					
		Person Who Was Pa	aid					
		T CISOTI WITO WAS I	alu					
		Number Street						
		City	State	Zip Code				
		J.,		_ip 0000				
		Email or website ad	dress					
		Person Who Made t				·		

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Deb	tor 1	Crystal		Williams-Mickle	Case number (if known	n)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for you deal with your credito not include any payment or train No  Yes. Fill in the details.	rs or to make payments		ur behalf pay or transfei	any property to any	one who promised to
	ш	res. I ili ili tile details.					
				Description and value of al transferred	ny property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City	Zip Code				
		City State	Zip Code				
		note both outright transfers and sters that you have already list  No  Yes. Fill in the details.		rity (such as the granting of a s			
				Description and value of a property transferred		ny property or received or debts pai e	Date id transfer was made
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you file ese are often called asset-prof		ou transfer any property to a	self-settled trust or sim	ilar device of which y	you are a beneficiary?
		No Yes. Fill in the details.					
	Ц	res. Fill III the details.		Description and value of	the property transferre	d	Date transfer was made
		Name of trust					

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Debt	or 1	Crystal First Name Middle Name	Williams-Mickle Last Name	Case number (if known)	_
Part	8:	List Certain Financial Accounts, Inst		xes, and Storage Units	
20.	Witl mov	hin 1 year before you filed for bankruptcy, wer ved, or transferred?	e any financial accounts or instr	ruments held in your name, or for your benefit, c	
	<b>✓</b>	No Yes. Fill in the details.			
			Last 4 digits of account number	Type of account or instrument account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	XXXX-	Checking Savings	
		Number Street		Money market Brokerage Other	
		City State Zip Code			
		Person Who Was Paid	XXXX-	Checking Savings	
		Number Street		Money market Brokerage	
				Other	
		City State Zip Code			
		you now have, or did you have within 1 year beer valuables?  No  Yes. Fill in the details.	efore you filed for bankruptcy, and the second seco	ny safe deposit box or other depository for secu	Do you still
			Who else had access to it:	Describe the contents	have it?
		Name of Financial Institution	Name		☐ No ☐ Yes
		Number Street	Number Street		_
		0	City State Zip	Code	
22.	Hav	City State Zip Code  re you stored property in a storage unit or place	e other than your home within 1	l year before you filed for bankruntov?	
	_	No		year service you med for summapley.	
	Ш	Yes. Fill in the details.	Who else had access to it?	Describe the contents	Do you still have it?
		Name of Storage Facility	Name		□ No
		Number Street	Number Street		Yes
		0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0	City State Zip	Code	
		City State Zip Code			

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Deb	tor 1	Crystal		Williams-Mickle	Case	e number (if known)	
		First Name Middle Name		Last Name			
Part	9:	Identify Property You Hold or Cont	rol for Son	neone Else			
23.	someone.						
	<b>V</b>	No					
	Ħ	Yes. Fill in the details.					
			Where is	the property?		Describe the contents	Value
				е р. ере. су .		2001.110 0110 00110110	7 4.1.0.0
		Owner's Name	Number St	reet			
		Number Street	-				
			City	State	Zip Code		
		City State Zip Code					
		•					
Part	10:	Give Details About Environmental	Informatio	n			
For	the p	urpose of Part 10, the following definitions apply	<i>r</i> :				
				ogulation conc	amaina nallutian a	contamination values of	
		<i>invironmental law</i> means any federal, state, or lo azardous or toxic substances, wastes, or materia		•	• .		
		icluding statutes or regulations controlling the cl			. •		
	<b>.</b> 9	ite means any location, facility, or property as def	fined under any	, environmental	law whether you	L DOW OWN Operate or utilize it	
		r used to own, operate, or utilize it, including dis		enviiorimentai	law, wrietrier you	Thow own, operate, or dulize it	
		-				and and atom as	
		lazardous material means anything an environmo exic substance, hazardous material, pollutant, co			ous waste, nazardo	ous substance,	
Rep	oort a	ll notices, releases, and proceedings that you kn	ow about, rega	ardless of when	they occurred.		
24.	Has	any governmental unit notified you that yo	u may be liab	le or potentia	lly liable under d	or in violation of an environmental law?	
	<b>✓</b>	No					
		Yes. Fill in the details.					
			Governme	ental unit		Environmental law, if you know it	Date of
							notice
		N ( )		. 1 . 2			
		Name of site	Governmer	ntal unit			
		Number Street	Number Sti	reet			
			City	State	Zip Code		
		0: 0: 1					
		City State Zip Code					
25.	Hav	e you notified any governmental unit of any	release of ha	azardous mate	erial?		
	_						
	넻	No					
	Ш	Yes. Fill in the details.					
			Governme	ental unit		Environmental law, if you know it	Date of
							notice
		Name of site	Governmer	ntal unit			
		Nicosala au Céna aé	Number Sti	reet			
		Number Street	r tarribor ou	001			
		Number Street	-				
		Number Street	City	State	Zip Code		

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Deb	tor 1	Crystal			Williams-Mickle	Case	e number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	, in any judic	ial or administra	tive proceeding under a	ny environment	al law? Include settlements and orde	rs.
	<b>V</b>	No						
		Yes. Fill in the deta	ils.					
				(	Court or agency		Nature of the case	Status of the
		Case title						case
		Case title						Pending
				(	Court Name			On appeal
		Case number		1	Number Street			
				<u>-</u>				Concluded
				(	City State	Zip Code		
Part	11:	Give Details A	bout Your	Business or	Connections to Any	y Business		
	1404		en 16					•
27.	Witl	nin 4 years before	you filed for	bankruptcy, did y	you own a business or h	nave any of the f	following connections to any busines	s?
		A sole propriet	tor or self-emp	oloyed in a trade, p	rofession, or other activity	, either full-time o	or part-time	
		A member of a	a limited liabilit	ty company (LLC)	or limited liability partnersl	hip (LLP)		
		A partner in a	partnership					
				ging executive of a				
		An owner of at	t least 5% of the	he voting or equity	securities of a corporation	ı		
	<b>✓</b>	No. None of the abo	ove applies. G	o to Part 12.				
		Yes. Check all that	apply above a	nd fill in the details	below for each business.			
					Describe the natur	e of the busines	• •	
							include Social Security n	umber or ITIN.
		Business Name			-		EIN:	
		Daoineso Name						
		Number Street			- Name of a constant		Dates business existed	
					Name of accounta	пт ог вооккеере		
		City	State	Zip Code			From To	
					Describe the natur	e of the busines	ss Employer Identification include Social Security n	
								diffici of Triiv.
		Business Name			-		EIN:	
					_		Datas husinasa suistad	
		Number Street			Name of accounta	nt or bookkeepe	Dates business existed er	
		0::			_		From To	
		City	State	Zip Code				
					D			
					Describe the natur	e of the busines	ss Employer Identification include Social Security n	
							EIN:	
		Business Name			_		EIV.	
		<del></del>			_		Dates business existed	
		Number Street			Name of accounta	nt or bookkeepe		
		City	Ctoto	Zin Cada	_	•	From To	
		City	State	Zip Code				

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Deb	tor 1	Crystal		Williams-Mickle	Case number (if known)
		First Name	Middle Name	Last Name	
28.	cred	litors, or other partie		lid you give a financial statement to	o anyone about your business? Include all financial institutions,
		No Yes. Fill in the details I	pelow.		
				Date issued	
		Name		MM/DD/YYYY	
		Number Street			
		City	State Zip Code	<del></del>	
Part	t 12:	Sign Below			
	true a	and correct. I unders	tand that making a false	e statement, concealing property, o	and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		<b>X</b> /2/02	and a LNAPHP and a NAPAL La	×	
		/S/ Ch	ystal Williams-Mickle of Debtor 1		Signature of Debtor 2
		o.g. a.a.	0. 200.0.		Date
		Date 10/2	28/2016		Date
	Did v	ou attach additional	pages to Your Statemer	nt of Financial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
		<b>1</b> 0			,
	Ξ.				
	Ш	és			
	Did y	ou pay or agree to pa	ay someone who is not	an attorney to help you fill out banl	cruptcy forms?
	<b>✓</b> N	lo			
		es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
'					Declaration, and Signature (Official Form 119)

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Fill in this information to identify your case:				
Debtor 1	Crystal		Williams-Mickle	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)			(State)	

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: CNAC/MI105 Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 050 Automobile Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Crystal		Williams-Mickle	Case number (if
1	First Name	Middle Name	Last Name	known)
!-4 V	. Un averier d Dave	and Dranatu Lagge		Part 2:
		onal Property Leases	Schedule G: Executory Co	ontracts and Unexpired Leases (Official Form 106G), fill in the
informa	tion below. Do not list	t real estate leases. Unexpired le	eases are leases that are st	till in effect; the lease period has not yet ended. You may assume
an unex	pired personal prope	rty lease if the trustee does not	assume it. 11 U.S.C. § 365	p(p)(2).
Des	cribe your unexpired	personal property leases		Will the lease be assumed?
Less	sor's name:			No Yes
	cription of leased erty:			
Less	sor's name:			☐ No ☐ Yes
	cription of leased erty:			
Less	sor's name:			☐ No ☐ Yes
	cription of leased erty:			
Less	sor's name:			□ No □ Yes
	cription of leased erty:			
Less	sor's name:			□ No □ Yes
	cription of leased erty:			
Less	sor's name:			□ No □ Yes
	cription of leased erty:			
Less	sor's name:			□ No □ Yes
	cription of leased erty:			
Part 3:	Sign Below			
Unde	_		y intention about any prop	perty of my estate that secures a debt and any personal
			4.4	
	s/ Crystal Williams-Mignature of Debtor 1	ickle	Signati	ure of Debtor 1
	ate 10/28/2016 MM/DD/YYYY		Date	MM/DD/YYYY

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B 203 (12/94)

### **UNITED STATES BANKRUPTCY COURT**

### **Northern District of Illinois**

In re	Crystal Williams-Mickle	е	Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATI	ON OF ATTORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and that compensation paid to me with services rendered or to be rendered is as follows:	nin one year before the fil	ling of the petition in bankruptcy, o	or agreed to be paid to me, for
	For legal services, I have agreed t	to accept		\$1,315.00
	Prior to the filing of this statement	t I have received		\$0.00
	Balance Due			\$1,315.00
2.	The source of the compensation page	aid to me was:		_
	<b>✓</b> Debtor	Other (spe	ecify)	
3.	The source of the compensation pa	aid to me is:		
	Debtor	Other (spe	ecify)	
4.	I have not agreed to share the members and associates of m	above-disclosed compe ny law firm.	ensation with any other person unle	ess they are
		law firm. A copy of the	tion with a other person or persons agreement, together with a list of t	
5.	In return for the above-disclosed for a. Analysis of the debtor's final bankruptcy;	_	der legal service for all aspects of lering advice to the debtor in deterr	
	b. Preparation and filing of an	y petition, schedules, st	atements of affairs and plan which	may be required;
	c. Representation of the debto	or at the meeting of cred	itors and confirmation hearing, and	I any adjourned hearings thereof;
6.	By agreement with the debtor(s), the	he above-disclosed fee	does not include the following serv	ices:
		CERTI	FICATION	
	I certify that the foregoing is a comp he debtor(s) in this bankruptcy proce		greement or arrangement for payn	nent to me for representation
	10/28/2016		/s/ Jason Diaz	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Williams-Mickle, Crystal	Case No				
_	Debtor(s)	0000 110	0.000 / 10.			
		Chapter.	Chapter7			
	VERIFICATIO	N OF CREDITOR MAT	RIX			
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their kno					
Date:	10/28/2016	/s/ Williams-Mick	le, Crystal			
		Williams-Mickle, Signature of Deb	Crystal			

CNAC/MI105 3718 STADIUM DR KALAMAZOO , MI 49008

SAFCO 6700 N Andrews Ave # 5 Fort Lauderdale , FL 33309

U S Dept Of Ed/fisl/ch Po Box 65128 Saint Paul , MN 55165

U S Dept Of Ed/fisl/ch Po Box 65128 Saint Paul , MN 55165

U S Dept Of Ed/fisl/ch Po Box 65128 Saint Paul , MN 55165

VERIZON WIRELESS PO BOX 4002 Acworth , GA 30101

U S Dept Of Ed/fisl/ch Po Box 65128 Saint Paul , MN 55165

DIV ADJ SERV 600 COON RAPIDS BV COON RAPIDS , MN 55433

AFNI, INC. 404 Brock Drive PO Box 3427 Bloomington , IL 61702

WORLD FINANCE CORPORAT 5519 EAST 82ND STREET INDIANAPOLIS, IN 46250

RECOVERY ONE LLC 3240 HENDERSON RD COLUMBUS, OH 43220 ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

AFNI, INC. 404 Brock Drive PO Box 3427 Bloomington , IL 61702

City of Chicago Department of Revenue 121 North LaSalle Street Chicago , IL 60602

Markoff Law 29 N Wacker Drive #550 Chicago , IL 60606

Nicor - PO Box 5407 PO Box 5407 Carol Stream , IL 60197

Peoples Gas 200 E. Randolph Chicago , IL 60601

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

AT&T Mobility One AT&T Way, Room 3A 104 Bedminster , NJ 07921

Verizon Wireless - Bankruptcy 500 Technology Drive, Suite 550 Saint Charles , MO 63304

JOHN M GALICH ESQ LLC 10075w W Lincoln Hwy Frankfort , IL 60423

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,315.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Crystal Mickle Matter Number 491472-001 Initial CM

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 10/28/2016

Attorney.

∩lien<del>t</del>

Crystal Mickle

Matter Number 491472-001

Initial: XCM

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Debtor 1 Crystal First Name		Williams-Mickle	Case number (if known)			
	estions for Reporting Purposes					
16. What kind of debts do you have?	nat kind of debts do  16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that f	r 7. Do you estimate th	at after any exempt propo to distribute to unsecured	erty is excluded and administrative I creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,0 5,001-10 10,001-2	,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?		\$10,000, \$50,000,	01-\$10 million 001-\$50 million 001-\$100 million 1,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
<sup>20.</sup> How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$10,000, \$50,000,	01-\$10 million 001-\$50 million 001-\$100 million 1,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below						
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12 of title 11, United States Code. I understand the relief available under each chapter, and I choose to procunder Chapter 7.					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help m out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
	I request relief in accordance w	ith the chapter of tit	le 11, United States Co	de, specified in this petition.		
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
	/s/ Crystal Williams-Mickle Signature of Debtor 1	Cupt Me	Signature of De	ebtor 2		
t	Executed on 10/28/2018 MM / DE	<del></del>	Executed on	MM / DD / YYYY		

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Fill in this infor	mation to identify your ca	ise:			
Debtor 1	Crystal		Williams-Mickle		
	First Name	Middle Name	Last Name	-	
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois	_	
Case number			(State)		
(If known)				-	
O. ( ; ; )	- 400D				Check if this is an
Official	Form 106De	<u>C</u>			amended filing
Doolarat	ion About an	— Individual Dah	tor's Schedules		12/15
Deciarat	JOII ADOUT UIT	marriadar DCL	tor o concurre		
If two married	people are filing togethe	er, both are equally resp	onsible for supplying correct i	nformation.	
money or prop	his form whenever you fi erty by fraud in connecti 1341, 1519, and 3571.	le bankruptcy schedule on with a bankruptcy ca	s or amended schedules. Mak ase can result in fines up to \$2	ing a false statement, concealing prop 250,000, or imprisonment for up to 20 y	erty, or obtaining ears, or both. 18
Part 1: Sigr	Below		·		· · · · · · · · · · · · · · · · · · ·
Did you p	ay or agree to pay some	one who is NOT an atto	rney to help you fill out bankru	uptcy forms?	To the Pellinger A.
<b>☑</b> No					Andrew to the female of the fe
T Yes.	Name of person		Attach Bankruptcy Pet Signature (Official Fort	tition Preparer's Notice, Declaration, and m 119).	1
41 14 14 14 14 14 14 14 14 14 14 14 14 1					
A Company					
Underne	notty of poriury I doctor	n that I have read the ci	mmary and schedules filed wi	ith this declaration and	3
the state of the s	are true and correct.	i mar i nave leau tile St	minuty and concades med wi	ind doord and and	
		S Martin	4.0		At all references
/s/ Cryst	al Williams-Mickle	when meer	*		had to the made

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 10/28/2016

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Debtor	1 Crystal		Williams-Mickle	Case number (if known)
	First Name	Middle Name	Last Name	
	editors, or other		u give a financial stateme	nt to anyone about your business? Include all financial institutions,
-	-		Date issued	
	Name		MM/DD/YYYY	
	Name			
	Number Stre	et	<del>-</del>	
	City	State Zip Code	-	
Part 12	Sign Below			
true	e and correct. I u ankruptcy case o X	inderstand that making a false stat	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date
Did	you attach addi	tional pages to Your Statement of	Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agre	e to pay someone who is not an at	torney to help you fill out b	ankruptcy forms?
区	No			
	Yes. Name of pe	rson		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor	Crystal		Williams-Mickle	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired Pe	rsonal Property Lease	es	
informat		estate leases. Unexpired	leases are leases that are	ntracts and Unexpired Leases (Official Form 106G), fill in the still in effect; the lease period has not yet ended. You may C. § 365(p)(2).
Des	cribe your unexpired person	nal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	cription of leased perty:		merekan Memilian (min 1919) bilan mendeleman dari (1919) ili 1919 (min memberikan band	Name, and a control of the control o
Les	sor's name:		in de la martine de la mar La martine de la martine d	□ No □ Yes
	cription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	cription of leased perty:			<del></del>
Les	sor's name:		nte primer i terre i transminum modelle corre primer i transportation di distinuire di provinci.	No Yes
	cription of leased perty:			
Les	sor's name:	er geleg i filosofie en	erminente en	No Yes
	cription of leased perty:			
Les	sor's name:	The state of the s		□ No □ Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			
Part 3:	Sign Below		`	
	r penalty of perjury, I decla erty that is subject to an un		ny intention about any prop	perty of my estate that secures a debt and any personal
_	's/ Crystal Williams-Mickle	Cupl Me	<b>★</b> Signatu	re of Debtor 1
	ate 10/28/2016 MM/DD/YYYY	* V	Date _	MM/DD/YYYY

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Williams-Mickle, Crystal	Case No	
	Debtor(s)		
		Chapter	Chapter7
	VERIFIC	ATION OF CREDITOR MAT	RIX
T knowledg	he above named Debtors hereby verify e.	that the attached list of creditors is tr	ue and correct to the best of their
Date:	10/28/2016	/s/ Williams-Mick Williams-Mickle, Signature of Del	Crystal

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Debtor 1			Williams-Mi	ckle Case num	ber (if known)		
	First Name	Middle Name	Last Name				
				Column A <b>Debtor 1</b>		Column B Debtor 2 or non-filing spouse	
8.Unen	ployment compens	sation		\$0.00		- •	
Do n	ot enter the amount i	f you contend that the amo Act. Instead, list it here:	ount received was a bene ↓		-		•
For y	ou		\$0.00		*		
For y	our spouse		\$0.00				
bene	fit under the Social Se	•		as a \$ <u>0.00</u>	_		-
amoi paym interr	unt. Do not include a rents received as a vic	sources not listed above. ny benefits received under to tim of a war crime, a crime errorism. If necessary, list o ow.	the Social Security Act or against humanity, or				
Work	ers Compensation			\$795.00			-
Othe	r Government Assista	ance	•	\$1,169.00	_		· •
Total	amounts from separ	ate pages, if any.		+\$0.00		+	
11. <b>C</b> a	culate your total c	urrent monthly income. A	dd lines 2 through 10 fo	or \$3,323.33	+		<b>=</b> \$3,323.33
each	•	otal for Column A to the to	_	\$3,020.00	_		-
00	ann. Thor add the				<b>.</b>	L	Total current
Part 2:	Determine Whe	ther the Means Test A	oplies to You				monthly income
		monthly income for the y					
	-	ent monthly income from lin			Copy lin	e 11 here →	\$3,323.33
	Multiply by 12 (the r	number of months in a year	).				X 12
12b.	The result is your an	nual income for this part of	the form.			121	o. <u>\$39,879.96</u>
13 Calc	ulate the median fa	mily income that applies	to you. Follow these st	eps:			
Fill in	the state in which ye	ou live.	Illinois	10 July 20 Jul			
Fill in	the number of peop	le in your household.	8	enter de la companya			
	the median family in ehold.	come for your state and siz	ze of			13.	\$120,521.00
To fi instr	nd a list of applicable	median income amounts, This list may also be availal are?					
14a.	Line 12b is less Go to Part 3.	than or equal to line 13. O	n the top of page 1, che	ck box 1, There is no presur	nption of ab	ouse.	
14b.	Line 12b is mor Go to Part 3 and	e than line 13. On the top d fill out Form 122A-2.	of page 1, check box 2,	The presumption of abuse i	s determine	d by Form 122A-2.	
Part 3:	Sign Below						
Ву	signing here, I declar	e under penalty of perjury the	nat the information on th	is statement and in any atta	chments is t	true and correct.	
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0 18				
×	/s/ Crystal William Signature of Debtor 1		Yeckle	Signature of Debtor 2	2		
		- 10		Data 40/00/0046			
	Date 10/28/2016 MM/DD/YYYY			Date 10/28/2016 MM/DD/YYYY	-		
		a, do NOT fill out or file Fo b, fill out Form 122A-2 and		Handanian in	, , , , , , , , , , , , , , , , , , ,	COLUMN DE ENTREMENTE CONTRACTOR DE LA CO	